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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Date June 11, 2007

Under the Paperwork Reduction Act of 199 respond to a collection of information unless it displays a valid OMB control number Effective on 12/08 2004.
Fees pursuant to the Consolidated Appropressions Act, 2003 (1) B. Complete if Known 10/658,923 Confirm. 2292 Application Number Filing Date September 9, 2003 First Named Inventor Frank C. Kohn **Examiner Name** Alton Nathaniel Pryor Applicant claims small entity status. See 37 CFR 1.27 Art Unit 1616 TOTAL AMOUNT OF PAYMENT 120.00 Attorney Docket No. 17396/09156 METHOD OF PAYMENT (check all that apply) Check Credit Card Money Order None Other (please identify): Deposit Account Deposit Account Number: 50-2548 Deposit Account Name: Nelson Mullins Riley & Scarborough, LLP For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee Charge any additional fee(s) or underpayments of fee(s) Credit any overpayments under 37 CFR 1.16 and 1.17 WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038. **FEE CALCULATION** 1. BASIC FILING, SEARCH, AND EXAMINATION FEES **FILING FEES** SEARCH FEES **EXAMINATION FEES Small Entity Small Entity Small Entity Application Type** Fee (\$) Fees Paid (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Fee (\$) Utility 300 150 500 250 200 100 Design 200 100 100 130 50 65 Plant 200 100 300 150 160 80 Reissue 300 150 500 600 250 300 Provisional 200 100 0 0 0 2. EXCESS CLAIM FEES **Small Entity** Fee (\$) Fee Description Fee (\$) Each claim over 20 (including Reissues) 50 25 Each independent claim over 3 (including Reissues) 200 100 Multiple dependent claims 360 180 **Total Claims Extra Claims Multiple Dependent Claims** Fee (\$) Fee Paid (\$) - 20 or HP = Fee (\$) Fee Paid (\$) HP = highest number of total claims paid for, if greater than 20. **Extra Claims** Fee Paid (\$) Fee (\$) -3 or HP =HP = highest number of independent claims paid for, if greater than 3. 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Number of each additional 50 or fraction thereof Extra Sheets Total Sheets Fee (\$) Fee Paid (\$) (round up to a whole number) x 4. OTHER FEE(S) Fees Paid (\$) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): One-month extension to time to file response \$120.00 SUBMITTED BY Registration No. 35,124 Telephone 864-250-2238 Signature (Attorney/Agent)

This collection of information is required by 37 CFR 1.136. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Name (Print/Type) Charles E. Dunlap, Ph.D., Esq.

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

Frank C. Kohn

Confirmation No.: 2292

Application No.: 10/658,923

Group No.: 1616

Filed: 09/09/2003

Examiner: Alton N. Pryor

For: Control of Shoot/Foliar Feeing Pests

with Pesticide Seed Treatments

Mail Stop Amendment Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450

PETITION AND FEE FOR EXTENSION OF TIME (37 C.F.R. § 1.136(a))

- 1. This is a petition for an extension of the time for a total period of one month to Office Action mailed 2/22/2007.
- 2. A response in connection with the matter for which this extension is requested is filed herewith.
- 3. Applicant is other than a small entity.

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a) and 1.10*

(When using Express Mail, the Express Mail label number is mandatory; Express Mail certification is optional.)

I hereby certify that, on the date shown below, this correspondence is being:

MAILING

deposited with the United States Postal Service in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

37 C.F.R. § 1.8(a)

with sufficient postage as first class mail.

37 C.F.R. § 1.10*

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☐ facsimile transmitted to the Patent and Trademark Office, (571) 273 - 8300.

Date: June 11, 2007

Mim Voet

(type or print name of person certifying)

^{*} Only the date of filing (§ 1.6) will be the date used in a patent term adjustment calculation, although the date on any certificate of mailing or transmission under § 1.8 continues to be taken into account in determining timeliness. See § 1.703(f). Consider "Express Mail Post Office to Addressee" (§ 1.10) or facsimile transmission (§ 1.6(d)) for the reply to be accorded the earliest possible filing date for patent term adjustment calculations.

4. Calculation of extension fee (37 C.F.R. § 1.17(a)(1)-(5)):

Extension (months)

Fee for other than small entity

One (1) month

\$120.00

Fee:

\$120.00

5. If an additional extension of time is required, please consider this a petition therefor.

Extension fee due with this request

\$120.00

6. Extended period for response

Based on the extension requested in this petition (and that for which a previous petition has been filed, if any), the extended period for response will expire on June 22, 2007.

7. Fee Payment

Attached is a check in the amount of \$120.00.

Charge any additional fees required by this paper or credit any overpayment to Deposit Account No. 50-2548.

A duplicate copy of this paper is attached.

Date: June 11, 2007

Reg. No.: 35,124

Tel. No.: 864-250-2238 Fax No.: 803-255-9831 Customer No.: 45850 Signature of Practitioner

Charles E. Dunlap, Ph.D., Esq.

Nelson Mullins Riley & Scarborough, LLP 1320 Main Street, 17th Floor

Columbia, SC 29201

U.S.